COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHDE040060 US

As a below named inventor, I h	ereby declare that:				
My residence, post office address and citizenship are as stated next to my name.					
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention the specification of which (check only one item below):					
entitled: Illumination syst	em comprising a radiation	n source and a fluorescent materi	al		
is attached hereto.					
was filed as United States a	pplication				
Serial No					
on					
and was amended					
on					
	al application				
Number PCT/IB2005/0505					
	21				
on February 10, 2005					
and was amended under PCT	Article 19				
on (if applicable).					
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.					
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:					
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119		
Europe	04 100 692.5	20 February 2004	YES		
A. A	U.S. D	DEPARTMENT OF COMMERCE -Patent and	d Trademarks Office (July 1994)		

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)				Attorneys Docket Number PHDE040060 US	
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)					
Lack E. Haken, Reg. No. 26 902 Direct Telephone Calls to:					
Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245		(name and tel (914)332-0			
		FAMILY NAME SCHMIDT	FIRST GIVEN NAME Peter		SECOND GIVEN NAME J.
201 R	RESIDENCE & CITIZENSHIP	CITY Aachen	STATE OR FOREIGN COUNTRY Germany		COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Südstraße 62	CITY 52064 Aachen		STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF	FAMILY NAME JÜSTEL	FIRST GIVEN NAME Thomas		SECOND GIVEN NAME
202	RESIDENCE &	CITY Witten	STATE OR FOREIGN COUNTRY Germany		COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Auf dem Kamp 7c	CITY 58455 Witten		STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF INVENTOR	FAMILY NAME HÖPPE	FIRST GIVEN NAME Henning		SECOND GIVEN NAME
203	RESIDENCE & CITIZENSHIP	CITY Kirchanschöring	STATE OR FOREIGN COUNTRY Germany		COUNTRY OF CITIZENSHIP Germany
POST OFFICE ADDRESS		POST OFFICE ADDRESS Eichenstraße 3	CITY 83417 Kirchanschöring		STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF INVENTOR	FAMILY NAME SCHNICK	FIRST GIVEN NAME Wolfgang		SECOND GIVEN NAME
204	RESIDENCE & CITIZENSHIP	CITY Gauting	STATE OR FOREIGN COUN		COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Am Würmufer 6	CITY 82131 Gauting		STATE & ZIP CODE/COUNTRY Germany
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
P. Lunis histal signature of inventor 202 signature of inventor 203					
DATE April, 29th, 2005 DATE Many, Ind, 2005 DATE					
SIGNA	ÂTURE OF INVENT	JK 204	V		

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

DATE

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)				Attorneys Docket Number PHDE040060 US		
DOW	ED OF ATTORNE	V: As a named inventor	I hereby appoint	the following attorney(s) and/ therewith. (List name and regi	or agent(s) to prose stration number)	ecute this application and
Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245				Direct Telephone Calls to: (name and telephone number) (914)332-0222		
FULL NAME OF FAMILY NAME INVENTOR SCHMIDT		Peter		SECOND GIVEN NAME J.		
201	RESIDENCE & CITIZENSHIP	CITY Aachen		Germany		COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Südstraße 62		CITY 52064 Aachen		STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF INVENTOR	FAMILY NAME JÜSTEL		FIRST GIVEN NAME Thomas		SECOND GIVEN NAME
202	RESIDENCE & CITY CITIZENSHIP Witten			Germany CITY		COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Auf dem Kamp 7c				STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF INVENTOR			Henning		SECOND GIVEN NAME
203	RESIDENCE & CITIZENSHIP			STATE OR FOREIGN COUNTRY Germany CITY 83417 Kirchanschöring		COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS					STATE & ZIP CODE/COUNTRY Germany
	FULL NAME OF FAMILY NAME INVENTOR SCHNICK			Wolfgang STATE OR FOREIGN COUNTRY Germany CITY		SECOND GIVEN NAME
204	RESIDENCE & CITIZENSHIP	CITY Gauting				COUNTRY OF CITIZENSHIP Germany
POST OFFICE POST C		POST OFFICE ADDR Am Würmufer				STATE & ZIP CODE/COUNTRY Germany
to be t	rue: and further that	atements made herein o	of my own knowled	wiedde that Willtill Taise State:	villful false statemer	rmation and belief are believed so made are punishable by fine nts may jeopardize the validity
SIGNATURE OF INVENTOR 201 SIGNATURE OF INVENTOR 202 SIGNATURE OF INVENTOR 203					. / /	

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATÉ
SIGNATURE OF INVENTOR 204		
DATE		

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)



Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)					Attorneys Docket Number PHDE040060 US	
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)						
Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245				Direct Telephone Calls to: (name and telephone number) (914)332-0222		
Edwa	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
	INVENTOR	SCHMIDT		Peter		J.
201	RESIDENCE &	CITY		STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
201	CITIZENSHIP	Aachen		Germany		Germany
	POST OFFICE ADDRE ADDRESS Südstraße 62					STATE & ZIP CODE/COUNTRY
				52064 Aachen		Germany
	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
	INVENTOR	JÜSTEL		Thomas		
202	RESIDENCE &	CITY		STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
202	CITIZENSHIP	Witten		Germany		Germany
	POST OFFICE	POST OFFICE ADDR	ESS	CITY		STATE & ZIP CODE/COUNTRY
	ADDRESS	Auf dem Kam		58455 Witten		Germany
	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
	INVENTOR HÖPPE			Henning		
203	RESIDENCE &	CITY		STATE OR FOREIGN COU	NTRY	COUNTRY OF CITIZENSHIP
203	CITIZENSHIP		Kirchanschöring		Germany	
	POST OFFICE POST OFFICE ADDR		ESS	CITY		STATE & ZIP CODE/COUNTRY
ADDRESS		Eichenstraße 3		83417 Kirchanschöring		Germany
	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
	INVENTOR	SCHNICK		Wolfgang		COUNTRY OF CITIZENSHIP
204	RESIDENCE &	CITY	4400		STATE OR FOREIGN COUNTRY	
204	CITIZENSHIP	Gauting		Germany		Germany
	POST OFFICE	POST OFFICE ADDR	FSS	CITY		STATE & ZIP CODE/COUNTRY
	ADDRESS	Am Würmufer 6		82131 Gauting		Germany
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.						
SIGNATURE OF INVENTOR 201 SIGNATURE		SIGNATURE O	OF INVENTOR 202 SI		GIGNATURE OF INVENTOR 203	
SIGNATURE OF INVENTOR 201		CIONALION INVENTED				
DATE DATE		DATE				
SIGNATURE OF INVENTOR 204						
Q.S	.os W.A	J				

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

